

13 Enter a SAR – Inpatient Hospital

Introduction to Enter a SAR – Inpatient Hospital

This section will describe how to enter a SAR that has an inpatient hospital as the service provider.

When entering a SAR with an inpatient hospital as the service provider, the user will specify the “Number of Days,” but will not associate service codes for this SAR. The SAR will have the client’s name, the inpatient hospital, service date information, and the number of days.

Additional SARs should be authorized for the admitting physician to cover the services that are not included in the Inpatient Hospital SAR. Examples would include surgical procedures and referrals to other physicians.

Objectives

At the completion of this section, you will be able to execute the following functions in CMS Net Web:

- Research Level of Service for an Inpatient Hospital in CMS Net Web
- Enter a SAR with the Inpatient Hospital as the Service Provider
- Specify the Number of Days on the SAR.

13.1 Research the Provider

Notes

1. Access Provider Management by clicking the “Provider” link.

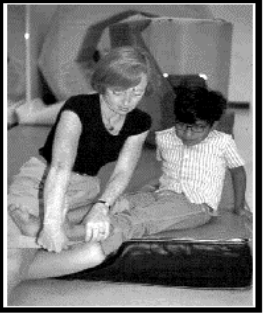
California Home [CDHS Home](#) [CDHS Comments](#) [CDHS Search](#) [CDHS Organization](#) Monday, April 19, 2004

Children's Medical Services

Caring for Children with Special Medical Needs...

[Contact Us](#) | [Help](#) | [Logout](#)

[Authorization](#) | **[Provider](#)** | [Formulary](#) | [Procedure Code](#) | [Administration](#) | [Reports](#)



Welcome To CMS NET...

Good morning EMI! You last signed on today at 10:16.

2. Search for the desired service provider (inpatient hospital).

California Home CDHS Home CDHS Comments CDHS Search CDHS Organization Wednesday, April 21, 2004

Children's Medical Services
Caring for Children with Special Medical Needs...

Contact Us | Help | Logout

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

Search - Providers -----Dev 27 --- 02/25/2004

Required fields are marked in *

SEARCH PROVIDER

Search Category * ☒ Hospital / Medical Provider ☐ Special Care Centers ☐ Dental Provider

Provider Name Provider ID

Specialty/Allied Health

Special Care Center Type

County

Provider Type

Accepting Referrals

Notes

An example of hospital search criteria.

Click the Search Category radio button "Hospital/ Medical Provider"

Enter hospital name (partial search)

Select County

Click "Search"

3. Select from the list of hospitals by clicking on the blue underlined name (link).

California Home CDHS Home CDHS Comments CDHS Search CDHS Organization Wednesday, April 21, 2004

Children's Medical Services
Caring for Children with Special Medical Needs...

Contact Us | Help | Logout

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

List of Providers

Provider Name	Provider ID	Status	Service Address	County	Paneled
KAISER FHP, INC	PHA456050	Active	2055 KELLOGG AVE,CORONA,CA,92679-0000	Riverside	
KAISER FND HLTH PLAN	PHA461080	Active	1717 E VISTA CHINO BLVD,STE 2,PALM SPRINGS,CA,92262-3569	Riverside	
KAISER FND HLTH PLN INC	PHA421860	Active	12815 HEACOCK ST,FL 2,MORENO VALLEY,CA,92553-2836	Riverside	
KAISER FNDATION HLTH PLN	PHA461550	Active	79-440 CORPORATE CENTER,STE 106,LA QUINTA,CA,92553-7241	Riverside	
KAISER FOUNDATION HOSP	PHA30686F	Active	10800 MAGNOLIA AVE,RIVERSIDE,CA,92505-3000	Riverside	
KAISER FOUNDATION HOSP	HSP40686F	Active	10800 MAGNOLIA AVE,RIVERSIDE,CA,92505-3000	Riverside	
KAISER FOUNDATION HOSP	PHB356900	Active	10800 MAGNOLIA AVE,RIVERSIDE,CA,92505-3000	Riverside	
KAISER PERM PHCY #506	PHA345440	Active	10800 MAGNOLIA AVE,FL 2,RIVERSIDE,CA,92505-3043	Riverside	
KAISER PERM PHCY #508	PHA376460	Active	12815 HEACOCK ST,MORENO VALLEY,CA,92553-2836	Riverside	
KAISER PERMANENTE PHAR	PHA344440	Active	10800 MAGNOLIA AVE,RIVERSIDE,CA,92505-3043	Riverside	
KAISER PERMANENTE PHARM	PHA434220	Active	36450 INLAND VALLEY DR,WILDOMAR,CA,92595-9583	Riverside	
KAISER PERMANENTE PHARM	PHA438810	Active	10800 MAGNOLIA AVE,RIVERSIDE,CA,92505-3043	Riverside	
KAISER, JOHN E MD	00G246930	Active	1820 FULLERTON AVE,STE 120,CORONA,CA,92681-3100	Riverside	

1-13 out of 13 Matching Records

4. Confirm that the hospital is an inpatient hospital.
5. Click the “Hospital” tab.

Notes

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

HSP30686F - KAISER FOUNDATION HOSP

Provider | SCC Association | PSU Mgmt | Paneling | **Hospital**

Details

Provider Name: KAISER FOUNDATION HOSP	Provider ID: HSP30686F	Last PMF Activity: 09/22/2003
Provider Type: COMMUNITY INPATIENT HOSPITAL		Medicare No: 050686
Phone Number: (714) 785-4600	Ext:	
Date Added: 11/17/1989	County: Riverside	
SSN:	Application Date: 11/17/1989	
License:	FEI No:	
Reject Reason:	License Date:	
Indicators:		
<input type="checkbox"/> Group <input type="checkbox"/> Short Doyle		
Laboratory:		
Out of State: <input type="checkbox"/> In State <input type="checkbox"/>		
Service Address: 10800 MAGNOLIA AVE	Pay Address: FILE 54602	
RIVERSIDE, CA 92505-3000	LOS ANGELES, CA 90074-4602	

Status Information

Status	Effective Date
Active	09/28/1989
Pending	11/17/1989
Pending	11/17/1989
Pending	11/17/1989
Pending	11/17/1989

Category of Service

Code	Start Date	End Date
002	09/28/1989	

Confirm that the provider is Inpatient Hospital.

Note the Provider ID for quick reference later.

6. View Length of Stay.

California Home | CDHS Home | CDHS Comments | CDHS Search | CDHS Organization | Wednesday, April 21, 2004

Children's Medical Services
Caring for Children with Special Medical Needs...

Contact Us | Help | Logout

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

HSP30686F KAISER FOUNDATION HOSP

Provider | SCC Association | PSU Mgmt | Paneling | **Hospital**

Hospital Level Type (New)

Hospital Level Type (Old)

Length of Stay:

Approval Start Date

Approval End Date

Last Update Date: 04/21/2004 Last Update By:

View Length of Stay (in this case it is 21 days).



Whatever is listed in the “Length of Stay” field will set an upper limit to the “Number of Days” for SARS associated to that inpatient hospital. It applies to extensions (the authorization + extension) as well.

13.2 Enter the SAR – Find the Client

Notes

1. Access Service Authorization Request by clicking the “Authorization” link.

California Home CDHS Home CDHS Comments CDHS Search CDHS Organization Wednesday, April 21, 2004

Children's Medical Services
Caring for Children with Special Medical Needs... Contact Us | Help | Logout

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

HOT SCOUT KAISER FOUNDATION HOSP

Provider SCC Association PSU Mgmt Paneling Hospital

Hospital Level Type (New) Select
Hospital Level Type (Old) Standard
Length of Stay: 21 days
Approval Start Date Jan 1 1965
Approval End Date Mon Day Year
Last Update Date: 04/21/2004 Last Update By:

2. Enter client search information.
3. Click the “Search” button.

Notes

Authorization | Provider | Formulary | Procedure Code | Administration | Reports
Search - Service Authorization

BY CLIENT

CCS Number Client Name

Date of Birth Gender

Client Index Number Legal County

SSN

BY PROVIDER

☐ Hospital / Medical Provider ☐ Special Care Centers ☐ Dental Provider

Provider Name Provider ID

Service Begin Date Service End Date

SAR Status

BY SAR NUMBER

SAR Number

An example of searching for the client by CCS #.

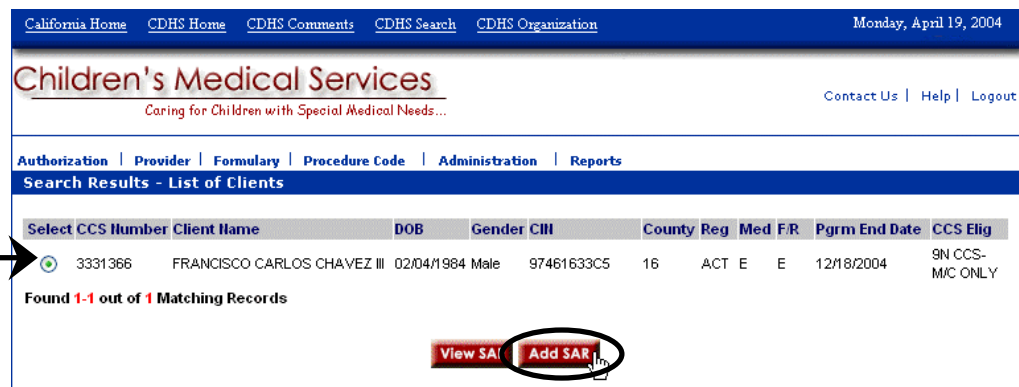


This search is similar to the one performed in CMS Net (character-based system).

Field descriptions are provided in CMS Net Web Online Help.

Notes

4. Click the “Select” radio button for the desired client. If an exact match is found, the option button will be pre-selected.
5. Then click the “Add SAR” button.



California Home | CDHS Home | CDHS Comments | CDHS Search | CDHS Organization | Monday, April 19, 2004

Children's Medical Services
Caring for Children with Special Medical Needs... | Contact Us | Help | Logout

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

Search Results - List of Clients

Select	CCS Number	Client Name	DOB	Gender	CIIN	County	Reg	Med	F/R	Pgrm End Date	CCS Elig
<input checked="" type="radio"/>	3331366	FRANCISCO CARLOS CHAVEZ III	02/04/1984	Male	97461633C5	16	ACT	E	E	12/18/2004	SN CCS- MIC ONLY

Found 1-1 out of 1 Matching Records

[View SAR](#) [Add SAR](#)



If the client is not listed, click the “Authorization” link located above the blue banner to return to the Search SAR page.

Field descriptions are provided in CMS Net Web Online Help.

13.3 Select a Provider for the SAR

This example will demonstrate how to select an inpatient hospital for a SAR.

1. Click the “Hospital/Medical Provider” radio button.
2. Enter provider search information.
3. Click the “Search” button.

Notes

You may search for the provider by Provider ID.

California Home CDHS Home CDHS Comments CDHS Search CDHS Organization Wednesday, April 21, 2004

Children's Medical Services
Caring for Children with Special Medical Needs... Contact Us | Help | Logout

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

Search - Providers

Required fields are marked

SEARCH PROVIDER

Search Category * ☒ Hospital / Medical Provider ☐ Special Care Centers ☐ Dental Provider

Provider Name Provider ID

Specialty/Allied Health

Special Care Center Type

County

Provider Type

Step 12

Step 14

Search **Clear**

Provider ID for a hospital is 9 characters.

You may also find hospitals by using the Provider Name & County fields:

- Prov Name = Kaiser
- County = Riverside

Field descriptions are provided in CMS Net Web Online Help.

4. Click on the link (blue underlined name of your selection).

California Home [CDHS Home](#) [CDHS Comments](#) [CDHS Search](#) [CDHS Organization](#) Wednesday, April 21, 2004

Children's Medical Services

Caring for Children with Special Medical Needs... [Contact Us](#) | [Help](#) | [Logout](#)

[Authorization](#) | [Provider](#) | [Formulary](#) | [Procedure Code](#) | [Administration](#) | [Reports](#)

List of Providers

Provider Name	Provider ID	Status	Service Address	County	Paneled
KAISER FOUNDATION HOSP	HSP30686F	Active	10800 MAGNOLIA AVE, RIVERSIDE, CA, 92505-3000	Riverside	

1-1 out of 1 Matching Records

Provider Name *

Address 1 *

City *

State *

☒ Medical / Hospital

☐ Special Care Centers

☐ Dental

Address 2

County *

Zip *

Select

Continue

Clear

Field descriptions are provided in CMS Net Web Online Help.

13.4 Enter SAR Information

- Enter SAR Information.
 - Make sure that the “Number of Days” has been entered. Be sure to include the discharge day in your “Number of Days”.
 - Do not add Service Codes to this SAR.
- Click the “Submit” button to submit for validation.

Notes

For this example the SAR allows for a hospital stay that may occur within a 3 month time frame (Jul – Sep). But the client is authorized to stay in the hospital for 10 days.

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

Enter SAR

FRANCISCO CARLOS CHAVEZ III, 3331366

Required fields are marked in *

CLIENT INFORMATION

Client Name: FRANCISCO CARLOS CHAVEZ III	F/R Elig: ELIGIBLE	Reg Status: ACTIVE
CCS Number: 3331366	Med Elig Status: ELIGIBLE	Application Status: SIGNED APP
Date of Birth: 02/04/1984	Diagnostic Only: NO	PSA Status: SIGNED
CIN: 97461633C5	CCS Elig Status: SN CCS-M/C ONLY	Program Begin Date: 12/18/2002
Gender: MALE	County: KINGS	Program End Date: 12/18/2004

PROVIDER INFORMATION

Provider Name: KAISER FOUNDATION HOSP	Provider Number: HSP30688F
Address: 10800 MAGNOLIA AVE, RIVERSIDE, CA, 92505-3000	County: Riverside

SAR INFORMATION

SAR Number: SAR Status:

Service Begin Date * Jul 1 2004 Service End Date Sep 1 2004

Service Request Date * Jun 3 2004 Number of Days 10

EPDST-SS ☐ Category Select

CCS SS ☐ State Approved ☐ Yes ☐ No

State Funded ☐

Primary Diagnosis* 745.4 VENTRICULAR SEPTAL DEFECT find >

Secondary Diagnosis find >

SERVICE CODE INFORMATION

Remove	Service Code	Modifier	Type	Alternate Code	Service Description	Alternate Description	Units	Quantity	Amount
--------	--------------	----------	------	----------------	---------------------	-----------------------	-------	----------	--------

SPECIAL INSTRUCTIONS

Add Services **Submit** Undo

The client header always shows the client’s “current” information.

CMS Net Web does not allow users to enter a SAR that has a service begin date before 7/1/2004.

The Number of Days that the user keys in must be equal to or less than the Length of Stay on the Hospital Tab.

The primary & secondary diagnosis default from Patient Registration. If you wish to change the diagnosis clear the field and type the new code or word and click on the Find button.

There are **no** service codes for SARs associated to inpatient hospitals.



You must manually enter “Number of Days” for SARs with inpatient hospital providers.

13.5 Note the SAR Number for your Records

1. Once the SAR has been submitted for validation, the SAR Number will be reflected when you are taken to the Narrative. Note this number for your records.

13.6 Enter Narrative

1. Enter Narrative text.
2. Click the “Save” button. You will return to the “View SAR” page.

Authorization | Provider | Formulary | Procedure Code | Administration | Reports

FRANCISCO CARLOS CHAVEZ III, 3331366 PENDING, SAR ID 97000008040

CLIENT INFORMATION

Client Name:	FRANCISCO CARLOS CHAVEZ III	F/R Elig:	ELIGIBLE	Reg Status:	ACTIVE
CCS Number:	3331366	Med Elig Status:	ELIGIBLE	Application Status:	SIGNED APP
DOB:	02/04/1984	Diagnostic Only:	No	PSA Status:	SIGNED
CIN:	97461633C5	CCS Elig Status:	9N CCS-M/C ONLY	Program Begin Date:	12/18/2002
Gender:	Male	County:	Kings	Program End Date:	12/18/2004

NARRATIVE INFORMATION

Narrative Date:	05/07/2004
General Topic:	Service Authorization #97000008040, Status: Pending
User:	ASHIDA,EMI
Provider:	KAISER FOUNDATION HOSP
Service Period:	05/01/2004 thru 11/20/2004
Provider Type:	COMMUNITY INPATIENT HOSPITAL
Distribution:	

ADDITIONAL INFORMATION

Service Code	Service Description
--------------	---------------------

NARRATIVE TEXT

Enter comments for the SAR here.

Save Cancel

Notes

Note the SAR Number

Enter Narrative text in this portion of the page.

Step 21